

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 21581-00488-US	
Application Number 10/501,685-Conf. #4435		Filed April 4, 2005	
For UBIQUINONE-ENRICHED FOODS			
Art Unit 1794		Examiner B. T. O'hern	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee	Small Entity Fee
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$130	\$65 \$ 130.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$490	\$245 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1110	\$555 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$1730	\$865 \$
<input type="checkbox"/>		\$2350	\$1175 \$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment by credit card.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0185</u> .			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the	<input type="checkbox"/> applicant/inventor.		
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
	<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>24,852</u>		
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u></u>		
<u>/Burton A. Amernick/</u>		<u>September 9, 2009</u>	
Signature		Date	
<u>Burton A. Amernick</u>		<u>(202) 331-7111</u>	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.		